

P14000012302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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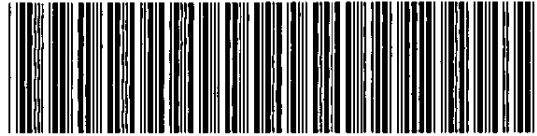
(Business Entity Name)

(Document Number)

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R. WHITE

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A&R Pharmacy
(Name of Corporation)

DOCUMENT NUMBER: P14000012302

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul Spivak
(Name of Person)

A&R Pharmacy
(Name of Firm/Company)

1201 US Hwy #1 Ste 43
(Address)

N. Palm Beach, FL 33408
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Spivak at (855) 3496800
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Irina Spivak, hereby resign as 05/05/2017
(Title)

of A&R Pharmacy, Inc.
(Name of Corporation)

P14000012302, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

I SPIVAK
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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